

Emergency Response Plan to HIV/AIDS in the African-American Community

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Governor's Task Force on HIV/AIDS in the
African-American Community Members

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Introduction

In Missouri, the impact of Human Immunodeficiency Virus/Acquired Immune deficiency Syndrome in the African-American Community has reached epidemic proportions. Through December 1999, the Centers for Disease Control and Prevention had received 12,470 reports of HIV/AIDS cases. Of those cases, 4,323 occurred among the African-American Community. African-Americans represent an estimated 11% of the total Missouri population; however, they make up 34.7% of all HIV/AIDS cases reported in Missouri.

Vision

HIV/AIDS case rates among African-Americans will be no different from the lowest rates of any other racial group in any Missouri community.

Goal

Reduce, by 20%, the rate of new HIV cases in the African-American community by the year 2005.

Overview

While African-Americans are sometimes viewed as one group, there are, in fact, a wide variety of populations in Missouri included under this heading. Upper socioeconomic status, lower socioeconomic status, Christian, Muslim, other religious faiths, inner-city, suburban, West Indies immigrants and recent Caribbean immigrants all fall into the African-American heading. Current epidemiological surveillance does not record the social, cultural, economic, geographic, religious, and political differences that may more accurately predict risk.

To assure effective community involvement
through coalitions and partnerships.

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Strategies:

Involve state, county and city government in town hall meetings during the spring of 2000. - **Governor's Council on AIDS, Department of Health**

Mobilize communities to organize focus groups of African-American adolescents/young adults, women, substance abusers and injection drug users, gay and bisexual men and men who have sex with men to conduct needs assessments at a local level. - **Governor's Council on AIDS, Department of Health**

Engage African-American professionals, civic and social organizations, as well as African-American churches/houses of faith, HIV/AIDS experts, media, community based organizations, policy makers, and social marketing personnel to provide educational awareness on the HIV/AIDS epidemic in the African-American community. - **Governor's Council on AIDS, Department of Health**

Conduct health marketing research in the African-American community. - **Department of Health**

Maximize the screening, education, and outreach potential for federally qualified health centers, family planning clinics, and alcohol and drug clinics through additional or redirection of resources. - **Department of Mental Health, Primary Care Council**

Develop studies geared to analyze the linkages between substance abuse, sexual behavior, STDs and HIV/AIDS infection rates in African-Americans. - **Department of Health, St. Louis University**

Conduct outreach activities in predominantly African-American colleges, universities, high schools, middle schools, churches/houses of faith and at-risk groups to offer STD/HIV/AIDS counseling and testing. - **Governor's Council on AIDS, Department of Health**

To assure discrimination is eliminated against African-Americans with HIV/AIDS regarding receipt of treatment and prevention services.

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Strategies:

Review the data, information and scientific analysis on needle exchange programs. - **Governor's Council on AIDS, Community Based Organizations**

Develop appropriate legislation for needle exchange programs. - **Governor's Council on AIDS, Community Based Organizations**

Issue reports that educates the public about the connection between discrimination, poverty, lack of health care coverage, and HIV/AIDS in the African-American community. - **Department of Labor**

Prominently address the issues of discrimination against African-Americans with HIV/AIDS at a statewide conference on HIV/AIDS in the African-American community. - **Governor's Council on AIDS, Department of Health**

Gain feedback solicited from community organizers and leaders before and after the creation of this Emergency Response Plan to HIV/AIDS in the African-American community. - **Governor's Council on AIDS**

Governor's Task Force on HIV/AIDS in the African-American Community

To assure state government agencies and officials take steps to prevent new cases of HIV/AIDS in the African-American community.

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Strategies:

Create, support and fund centralized facilities for African-Americans living with HIV/AIDS to assist them in medical, legal, housing, food, and substance abuse needs in a "one-stop shopping" social, emotional and spiritual forum in an effort to prevent the increase of new cases. - **Department of Social Services, Department of Mental Health, Department of Health**

Work with HIV/AIDS professionals to develop standards of treatment for incarcerated African-Americans. - **Department of Corrections**

Support and develop targeted, culturally appropriate prevention messages. - **Governor's Council on AIDS, Community Based Organizations, Department of Health**

Re-assess HIV/AIDS prevention and treatment funding to assure allocations are based on new and existing demographic data about the epidemic in the African-American community. - **Statewide and Regional HIV/AIDS Community Planning Groups**

Promote local and state needle exchange programs based on existing federally-funded research that proves that such programs prevent HIV/AIDS infection rates without increasing illegal substance abuse. - **Community Based Organizations**

Utilize the resources of African-American agencies to provide HIV/AIDS services to the African-American community. - **Department of Health, Department of Labor**

To assure culturally competent programs are targeted to the African-American community.

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Women:

Over the past decade, the HIV/AIDS epidemic has increased most dramatically among African-American women. Even if women know how to protect themselves from HIV/AIDS infection, awareness of the consequences must be coupled with the skills and support needed to change behavior.

Strategies:

Assure African-American women have access to female-controlled STD/HIV/AIDS prevention methods and possess the skills to use them consistently and correctly. - **Department of Health**

Encourage comprehensive, integrated HIV/AIDS care that addresses the entire spectrum of health care needs and eliminate the barriers that prevent access to services. - **Department of Health**

Assure targeted health communication campaigns and risk reduction programs are available to African-American women. - **Department of Health, Department of Mental Health**

Assure appropriate testing, pre/post-test counseling and reporting for African-American women is available in alcohol and drug treatment programs serving women and children. - **Department of Mental Health, Department of Health**

Assure state or city correctional facilities and diagnostic centers; whether they be for youth, women, or men, offer educational programs to African-American offenders through pre/post testing, internal educational videos, handout materials, health fairs, and collaborative pre-release efforts with the Department of Health. - **Department of Corrections, Department of Social Services, Department of Health**

To assure culturally competent programs are targeted to the African-American community.

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Youth:

Many young adults were likely infected as teenagers. It is estimated that half of all new HIV/AIDS infections in the United States are among people under the age of 25, and a majority of young people are infected as a result of sexual activity. AIDS is the leading cause of death for African-American men and women between the ages of 25-44.

Strategies:

Partner with schools and the Department of Elementary and Secondary Education to integrate school-based programs that include a focus on delaying sexual activity among young people and how they can protect themselves. - **Department of Elementary & Secondary Education, Governor's Council on AIDS**

Partner with houses of faith for space in buildings to provide classes on social graces, respect, and how to improve self-esteem. - **Department of Health, Department of Elementary and Secondary Education**

Develop partnerships with community parent groups to serve as advocates in the schools for more effective school based prevention programs. - **Department of Elementary & Secondary Education, Governor's Council on AIDS, Community**

Partner with community based organizations to assure the presence of programs and services to address the needs of adolescents who are most vulnerable to HIV/AIDS infection, such as homeless or runaway youth, juvenile offenders, and high school drop outs. - **Department of Social Services, Department of Corrections**

To assure culturally competent programs are targeted to the African-American community.

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Men:

Sexual identity for African-American men who have sex with men can be highly situational and context-dependent. African-American men who have sex with men may identify themselves as gay, bisexual, or heterosexual depending on the interpersonal, familial, social, business, or sexual context. A key factor in this identification paradox is that many individuals associate HIV/AIDS infection with gay-identified men. African-American men who have sex with men and do not identify themselves as gay, may see safer sex messages and other avoidance efforts as irrelevant; therefore, posing a challenge to targeted HIV/AIDS prevention efforts.

Strategies:

Assure prevention strategies for African-American men who have sex with men are culturally competent and relevant, community based, designed and implemented by members of the African-American men having sex with men community. -

Community Based Organizations

Develop targeted, sustained prevention programs for African-American men who have sex with men, who self-identify themselves as gay and bisexual, and separate prevention programs for those who do not. - **Department of Health**

Expand focused education/outreach and outreach testing to African-American men who have sex with men. - **Department of Health**

Develop programmatic strategies that build self-esteem and social graces, reinforce positive identity, and instill a sense of respect for self, others, and the community. - **Department of Elementary & Secondary Education, Community Based Organizations**

Assure state or city correctional facilities and diagnostic centers, whether they be for youth,

women or men, will offer educational programs to offenders through pre/post HIV/AIDS testing, internal educational videos, handout materials, health fairs, and collaborative pre-release efforts with the Department of Health. - **Department of Corrections, Department of Social Services, Department of Health**

To assure adequate access to HIV/AIDS
Care Services.

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Strategies:

Create and distribute widely a menu of benefits for African-Americans living with HIV/AIDS. -

Department of Health, Department of Mental Health, Department of Social Services, Community Based Organizations

Assist in the establishment of indigenous health care agencies in the African-American community where none exist. - **Department of Health, Governor's Council on AIDS, Department of Mental Health, Department of Social Services**





[Missouri Department of Social Services](#)



[Missouri Department of Elementary and
Secondary Education](#)



[Missouri Department of Corrections](#)